2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 16, 2000 8:00 am
Secretary of State

05-04-2000 90031 005 ***158.75
06-16-2000 90111 011 *****8.75

DOCUMENT # P99000020053

1. Entity Name

ABRAHAM'S WAY, INC.

Principal Place of Business	Mailing Address
13215 SW 87TH TERRACE MIAMI FL 33183	13215 SW 87TH TERRACE MIAMI FL 33183-4166

#531

[redacted]

2. Principal Place of Business	3. Mailing Address
978 Harrison Crossroad Loop	978 Harrison Crossrd Loop
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Reidsville NC	City & State: Reidsville NC
Zip: 27320 Country: USA	Zip: 27320 Country: USA

DO NOT WRITE IN THIS SPACE

65-0904571

4. FEI Number 65-090451 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PEREIRA, JOSEPH A JR.
10300 SW 72ND ST
#470C
MIAMI FL 33173

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE See attachment of transfer of corporation

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LEE, DENNIS A 13215 SW 87TH TERRACE MIAMI FL 33183	☐ Delete	" " P.O. Box 1946 Reidsville NC 27323	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD LEE, JENNIFER L 13215 SW 87TH TERRACE MIAMI FL 33183	☐ Delete	" " P.O. Box 1946 Reidsville NC 27323	☑ Change ☐ Addition
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CR2E034 (9/99)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jennifer Lee Jennifer Lee 4-14-00 Secretary

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

FEI 11 650904571

EIN = FEI = 65-0904571